STATE OF SOUTH CAROLINA) PERODE THE			
(Caption of Case) Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo	BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA			
Curtis Entermises a	TRANSPORTATION COVER SHEET			
Ochington Inc OBA	DOCKET 10/8 - 353. T			
Lucy stocky act	If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.			
(Please type or print) Submitted by: Linda Curtis	Telephone: (843)616-6578			
Address: 1303 Curtis Drive	Fax: (843)485-0056			
Darlington, SC 29540	Other:			
NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely. NATURE OF ACTION (Check all that apply)				
Application - Class A/A Restricted	Request for Name Change on Certificate			
Application - Class C Taxi	Request to Amend Scope of Authority			
Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)			
Application - Class C Charter Bus	Request to Amend Passenger Limit			
Application - Class C Non-Emergency	Request			
Application - Class C Stretcher Van	Exhibit			
Application - Class E Household Goods	Late-Filed Exhibit			
Application - Class E Hazardous Waste	Letter			
Application	Proposed Order			
Request for Extension to Comply with Order	Publisher's Affidavit			
Request for Order Granting Authority to Obtain a Certificate	Reservation Letter			
of Public Convenience and Necessity to be Rescinded	Response			
Request for Cancellation of Certificate	Return to Petition			
Request for Suspension	Other:			
Request for Reinstatement				

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.



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PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

CLASS C - NON-EMERGENCY	Date: $\frac{\eta/29/2018}{2018}$
Application is hereby made for a Certificate of Public Conve of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendme	· · · · · · · · · · · · · · · · · · ·
1. Curhs Enterprises of Darlington Enc. De Name under which business is to be conducted (corporation, pa	A Samo Midical Transportation itnership, or sole proprietorship, with or without trade name.
1303 Curty Drive, Drington Street/Address	SC 29540
Strekt/Address	of Applicant
Mailing Address of Applicant (in	f different from street address)
	•
(843) 616-6578 Phone	Fax
- tyeesha. Curtis@gmail.com Email A	
Email A	ddress
 If the Applicant is an LLC or a corporation, a copy of the C Secretary of State and the Articles of Incorporation must be a Carolina Secretary of State "Foreign Corporation" Certifica 	attached. (If incorporated outside of SC, attach South
3. Select Entity Type: (Check one)	
☐ Individual Owner/Sole Proprietorship	
Partnership - List names and address of all person ha	
Corporation - List names and addresses of two princip	pal officers.
Linda Curtis, 1021 Wrenwood	Rd Florence SC 29505
Sandra Curtis, 1232 Curtis	Dr. Darlington SC 29540

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

Financial Statement

Applicant's assets and liabilities are as follows:

Assets:		<u>Liabilities:</u>		
Value of Real Estate	311,200.00	Mortgage/Loan on Real Estate	100,000	
Value of Motor Vehicles	2,000.00	Loans Owed on Motor Vehicles	Ð	
Cash on Hand	1500-00	Business/Other Loans Owed	Ð	
Cash in Bank	500.00	Other Liabilities or Debts	~	
Value of Other Assets and Equipment	-0	Total Liabilities	100,000 ~	
Total Assets	315,200.00+			

INSTRUCTIONS:

- 1. "Value of Real Estate" means the actual or estimated market value of any real property/buildings owned by the Company/Business Applying for a Certificate.
- 2. "Mortgage/Loan on Real Estate" means the outstanding balance on any Mortgage, Equity Line or other Loan secured by the Real Estate listed in Item 1.
- 3. "Value of Motor-Vehicles" means the actual or fair estimated value of any moving vans, trucks or other vehicles owned by the Company/Business Applying for a Certificate.
- 4. "Loans Owed on Motor Vehicles" means the outstanding balance on any loans or liens on the vehicles listed in Item 3.
- 5. "Cash on Hand" is the total of actual cash held by the Company/Business applying for a Certificate on the day this form is filled out.
- 6. "Business/Other Loans Owed" means the outstanding balance on any small business loan or other unsecured loan made by a person, bank or business to the Business/Company applying for a Certificate.
- 7. "Cash in Bank" means the current balance in checking accounts, savings accounts or the like in the name of the Company/Business applying for a Certificate. Do not include retirement accounts or personal bank account balances.
- 8. "Value of Other Assets and Equipment" should include the actual or estimated value of items such as office equipment (computers/furnishings), moving equipment (hand trucks/blankets/strapping), and trailers.
- 9. "Other Liabilities or Debts" means specific amounts/balances which the Company/Business applying for a Certificate knows that it owes to other persons or companies; for example Franchise Fees. This does NOT include regular bills such as electricity bills, security system costs, insurance, salaries, etc.

PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges:

· I so permite

Requested Scope of Authority: Check all counties in which you are requesting permission to operate. You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

Abbeville	Cherokee	Florence	Lee	Saluda
Aiken	Chester	Georgetown	Lexington	Spartanburg
Allendale	Chesterfield	Greenville	Marion	Sumter
Anderson	Clarendon	Greenwood	Marlboro	Union
Bamberg	Colleton	Hampton	McCormick	Williamsburg
Barnwell	Darlington	Horry	Newberry	York
Beaufort	Dillon	Jasper	Oconee	,
Berkeley	Dorchester	Kershaw	Orangeburg	Statewide
Calhoun	Edgefield	Lancaster	Pickens	
Charleston	Fairfield	Laurens	Richland	

DESCRIPTION OF EQUIPMENT

You are not required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of <u>seathelts</u> in the vehicle, including the driver's seatbelt.)

1-7 Passengers, including driver

8-15 Passengers, including driver

MAKE	YEAR & MODEL	VIN#	EMPTY WEIGHT	WHEEL- CHAIR LIFT
2003	Honda Odyssey	5FNRL18953B135374	4,387	\mathcal{N}
		-		
				,
<u></u>				
			· · · · · · · · · · · · · · · · · · ·	
32				

INSURANCE QUOTE

This form MUST BE COMPLETED.

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. THIS IS ONLY A QUOTE.

The following insurance quote is for:

Quitis RHOMOSOS of Ochimin Inc DOF	me
Quris Enterprises of Ornington In The Name of Applicant The	JICCT TO TRADIN
TOOK TO TO THE PROPERTY OF THE	
Address of Applicant	

Amount of Premium:

Liability Insurance \$ 400+

The above quoted premium is for a term of _____ months.

Minimum Limits - Bodily injury and property damage limits will not be less

than the following:

Limits Quoted

Liability Combined Each Occurance	\$ 1,000,000	ICOCCC
Medical Payments per Person	\$ 1,000	

Name of Insurance Company

Name of Insurance Company

Home Office Address of Company

I, the Applicant, am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact the Department of Motor Vehicles at (803) 896-8457 or (803) 896-9903.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

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Exhibit Fit, Willing, and Able (FWA)

1. Is there currently any outstanding judgments against the Applicant?

Curis Enterprises of Derlington Tro On Some Metro

	O Yes	⊘ No
	If Yes, list judgements he	ere:
2.	Is Applicant familiar with	all statutes and regulations, including safety regulations and governing for-hire motor
	- -	h South Carolina, and does Applicant agree to operate in compliance with these
	statutes and regulations?	
	⊘ Yes	O No
3.		Commission's insurance requirements and the insurance premium costs associated
	therewith?	O No
	🖒 Yés	O No

Exhibit on Driver Qualifications

1.	CPR Certificate or i	_	at least a current American Red Cross Standard First Aid and tverify/record such training must be kept on file at the outh Carolina.
	⊘ Yes	O No	
2.		ds that drivers must be in cor	pliance with all OSHA regulations.
	⊘ Yes	O No	
3.			d in the use of all vehicle installed safety equipment such as and other equipment as outlined in PSC Regulations.
	⊗ Yes	O No	
4.		ds that drivers must be able to luding wheelchair users. \(\rightarrow\) No	o physically perform actions necessary to assist persons
5.		ds that drivers must wear a prodriver and the company for w	ofessional uniform and photo identification badge that hom the driver works.
б.	Applicant understand	ds that drivers must complete	twelve (12) hours of in-service training annually in the area
		s that verify/record such train	ing must be kept on file at the company's primary place of
	Yes	O No	

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 EXECUTIVE CENTER DRIVE, SUITE 100 COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

Please check the applicable box:

The Applicant AGREES to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the email address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc. gov to create a My DMS account.

The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Applicant's Signature

President
Title of Applicant (e.g. President, Owner, etc.)

COUNTY OF FORENCE

Commission Expires

Th

n W

Print Application

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

i, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

CURTIS ENTERPRISES OF DARLINGTON, INC.,

a corporation duly organized under the laws of the State of South Carolina on February 20th, 2004, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 23rd day of May, 2018.

Mark Hammond, Secretary of State

CERTIFIED TO BE A TRUE AND CORRECT COPY AS TAKEN FROM AND COMPARED WITH THE ORIGINAL ON FILE IN THIS OFFICE

> Jul 16 2018 REFERENCE ID: 1807141407200

- Mak Howard

FILED

STATE OF SOUTH CAROLINA SECRETARY OF STATE

FEB 2 0 2004

SECRETARY OF STATE

ARTICLES OF INCORPORATION STATUTORY CLOSE CORPORATION

TYPE	OR PRINT C	SARLY	IN BLACK INK		
1.	The name of the proposed corporation isCurtis Enterprises of Darlington. Inc				
2.	This corporation is a statutory close corporation, pursuant to Chapter 18, Title 33 of the 1976 South Carolina Code of Laws, as amended.				
3.	The Initial registered office of the corporation is 1309 Curtis Drive Street Address				
	Charling	lan.	Darfinoton	SC	29540
	Darling City	<u> </u>	County	State	2lp Code
	₩Q Ø		egistered agent at such addres	Print Name	
				aturant na Barbatanad Bones	
			I hareby consent to the appoint	niment as Registered Agent.	
			Sinda Sanatur	Curlen	
			Signature		
4.	applicat		n is authorized to issue shares The corporation is authorized shares authorized is 100,000	l to issue a single class of shin	
	b.	[]	The corporation is authorized	to issue more that one class	of shares:
			Class of Shares	Authorized No. of	Each Class
			•	•	
			·		
	class, th	m reint	tvided into beo or more classes ive rights, preferencee, and ilm are as follows:	or if any class of shares is div liations of the shares of each o	ided into series within a ass, and of each series
5.	a delaye a delaye amende	ed date	of the corporation shall begin is indicated (See Section 33-	es of the filing date with the So -230(b) of the 1978 South Ca	ecretary of State unless rolina Code of Laws, as
· 6.	Unless specified otherwise below, the transfer of shares of stock of the corporation shall be subject to the restrictions set out in Sections 33-18-110 through 33-18-130 of the 1976 South Carolina Code of Laws, as amended. Specify any varietions in the statutory format in Sections 33-18-110 through 38-18-130.				
7,	Unless 210 of t	otherw he 197	tee specified below the corpora '6 South Carolina Code of Law	tion shall have a board of direct s, as amanded).	ors (See Section 33-18-
	П	This c	corporation elects not to have a	board of directors.	
8.	Check,	if appli	cable.		
	[]	the 19	orporation elects to have the p 178 South Carolins Code of La holder the right to compel the s, apply.	MR. BR. BITHORIGO GI, WINICH GIVEN L	THE ESTINITY OF ILL COCCUSTOR

040618-0327 |國際開闢的基礎的

_ ~_

Specify any variations in the statutory format in Sections 33-18-140 through 33-18-170.

CERTIFIED TO BE A TRUE AND CORRECT COPY
AS TAKEN FROM AND COMPARED WITH THE
ORIGINAL ON FILE IN THIS OFFICE

Jul 16 2018

REFERENCE ID: 1807141407200

Mille to		S.L.
MONTH OF ST	MEG COL	CIACIA

施芒				

			•
9.	HOHORN	ptional provisions, which the corporation elects a (See the applicable provisions of Sections 3 376 South Carolina Code of Laws, as amende	to include in the articles of incorporation, are as 3-2-102, 33-18-330, 35-2-105, and 35-2-221 of d).
10.	The na	ame, address, and signature of each incorpor	stor is as follows (only one is required):
	3 3.	Samuel & Curtin	v -
		PO Box 1075, Darlington, SC 29540.	marine and the second s
	b.	Linda Curtis Nama	
	ć	PO Box 1078, Darlington, C 29540 Accinese Signature Signature	
	C.	Name	
		Address	<u></u>
		Signature	
11.	certify t	mar ma corporation, to whose articles of incorp	need to practice in the state of South Carolina, oration this certificate is attached, has complied 76 South Carolina Code of Laws, as amended.
Date _	2/2	104 <u>C</u>	Dud Julleposur
			ros Phillios Ervin
			9 Sox 12676
		<u>.Ek</u>	тепсе, SC 26504-3578
		- (I	43) 687-8613

November 1st, 2018

Linda Curtis 1303 Curtis Drive Darlington SC 29540

Dear PSC,

Hi I am requesting this authority process to be expedited. This is my only source of income. If there are any questions or concerns, please contact me at 843-616-6578

Sincerely,

Linda Curtis

OLEHASO SC SOIS OFFICE